



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Committee to Hold Jack Evans Accountable	2. OCF Identification Number RECCC2196670
Address 2448 Massachusetts Ave., NW	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20008	

4. TYPE OF REPORT: **July 31st Report**

This REPORT contains activity for: **Not Applicable**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 2/1/2019 through 7/31/2019		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 100.00	
(c) Total Receipts [from Line (16)]	\$ 5,100.00	\$ 5,200.00
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 5,200.00	
7. Total Expenditures (from Line 22)	\$ 616.54	\$ 616.54
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 4,583.46	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

Ms. Eleanor Ory

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

07/27/2019

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND EXPENDITURES
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Committee to Hold Jack Evans Accountable	REPORT COVERING THE PERIOD FROM: 2/1/2019 TO: 7/31/2019	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 5,100.00	\$ 5,200.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 5,100.00	\$ 5,200.00 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 5,100.00	\$ 5,200.00 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 506.54	\$ 506.54 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 110.00	\$ 110.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 110.00	\$ 110.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 616.54	\$ 616.54 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	100.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	5,100.00
25. SUBTOTAL (add Lines 23 and 24)	\$	5,200.00
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	616.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	4,583.46

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting)

Committee to Hold Jack Evans Accountable

1. Full Name, Mailing Address and Zip Code Kristen Renee Furnish 410 Camden Ct, Salisbury, MD 21801	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/18/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Social Media Specialist Name and Address of Employer Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 500.00	
2. Full Name, Mailing Address and Zip Code Cesar P Maxit 1830 Belmont Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/10/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Graphic Designer Name and Address of Employer RVLTN 1830 Belmont Rd NW, Washington, DC 20009		
Aggregate Year-To-date		\$ 500.00	
3. Full Name, Mailing Address and Zip Code Adam Eidinger 2448 Massachusetts Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/16/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Mintwood Strategies 2248 Massachusetts Ave NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 500.00	
4. Full Name, Mailing Address and Zip Code Evan Kroske 1841 Columbia Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/16/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Software Engineer Name and Address of Employer Amazon 13200 Woodland Park Rd, Herndon, VA 20171		
Aggregate Year-To-date		\$ 500.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Committee to Hold Jack Evans Accountable

5. Full Name, Mailing Address and Zip Code Robin S. Diener 1812 Corcoran St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/20/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Project Director Name and Address of Employer Center for the Study of Responsive Law 1530 P St NW, Washington, DC 20005		
Aggregate Year-To-date		\$ 500.00	
6. Full Name, Mailing Address and Zip Code David Schwartzman 1634 Montague St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/24/2019	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 250.00	
7. Full Name, Mailing Address and Zip Code Joshua Kaleb Carroll 3427 Holmead Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/28/2019	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Software Developer Name and Address of Employer Qntry Corp 65 Rhode Island Ave NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 200.00	
8. Full Name, Mailing Address and Zip Code Dino J Druji 315 N West St, Alexandria, VA 22314	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/03/2019	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
9. Full Name, Mailing Address and Zip Code John U Capozzi 1619 G St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2019	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Technical Recruiter Name and Address of Employer Hill Technologies, Inc 700 Pennsylvania Ave SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 50.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Committee to Hold Jack Evans Accountable

10. Full Name, Mailing Address and Zip Code Carole Lewis Anderson 3616 Reservoir Rd NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/05/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Sole Proprietor Name and Address of Employer Masdun Capital 783 Summerdean Rd, Middlebrook, VA 24459		
Aggregate Year-To-date		\$ 500.00	
11. Full Name, Mailing Address and Zip Code John D Hanrahan 1505 Q St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/16/2019	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 100.00	
12. Full Name, Mailing Address and Zip Code Deborah Moradi 6101 Goldsboro Rd, Bethesda, MD 20817	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/16/2019	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 200.00	
13. Full Name, Mailing Address and Zip Code Steven M Rabinowitz 3010 Ordway St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/19/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation doctor Name and Address of Employer Bluelight Strategies 4201 Connecticut Ave NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 500.00	
14. Full Name, Mailing Address and Zip Code Tina C Hobson 1330 Massachusetts Ave NW apt 713, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/21/2019	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 100.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Committee to Hold Jack Evans Accountable

15. Full Name, Mailing Address and Zip Code Lawrence D Rickards 1710 Hobart St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/24/2019	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
16. Full Name, Mailing Address and Zip Code Karl Egbert 1523 27th St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/26/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation lawyer Name and Address of Employer Baker McKenzie 815 Connecticut Ave NW, Washington, DC 20006		
Aggregate Year-To-date		\$ 500.00	
17. Full Name, Mailing Address and Zip Code John P Marrkand 1207 Holly St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/29/2019	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Non-profit manager Name and Address of Employer Partners for Development 8720 Georgia Ave Ste 906, Silver Spring, MD 20910		
Aggregate Year-To-date		\$ 100.00	
TOTAL This Period (Aggregate of all Receipt pages)			\$ 5,100.00

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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Committee to Hold Jack Evans Accountable

1. Full Name, Mailing Address and Zip Code Deluxe Checks 100 M st SE, Washington, DC 20003	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/24/2019	Amount of Each Expenditure This Period \$ 55.53
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code FedExOffice 1812 Adams Mill Rd NW, Washington, DC 20009	Purpose of Expenditure Printing	Date (month, day, year) 05/20/2019	Amount of Each Expenditure This Period \$ 74.94
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code FedExOffice 1812 Adams Mill Rd NW, Washington, DC 20009	Purpose of Expenditure Printing	Date (month, day, year) 05/20/2019	Amount of Each Expenditure This Period \$ 74.94
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code FedExOffice 1812 Adams Mill Rd NW, Washington, DC 20009	Purpose of Expenditure Printing	Date (month, day, year) 05/20/2019	Amount of Each Expenditure This Period \$ 3.12
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code SunTrust 100 M St SE, Washington, DC 20003	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/31/2019	Amount of Each Expenditure This Period \$ 3.00
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code SunTrust 100 M St SE, Washington, DC 20003	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/28/2019	Amount of Each Expenditure This Period \$ 3.00
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Rite Aid 1306 U St NW, Washington, DC 20009	Purpose of Expenditure Supplies	Date (month, day, year) 06/28/2019	Amount of Each Expenditure This Period \$ 5.28
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Chipotle 1508 14th St NW Ste 1, Washington, DC 20005	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/01/2019	Amount of Each Expenditure This Period \$ 34.71
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code Chipotle 1508 14th St NW Ste 1, Washington, DC 20005	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/01/2019	Amount of Each Expenditure This Period \$ 11.17
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Chipotle 1508 14th St NW Ste 1, Washington, DC 20005	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/01/2019	Amount of Each Expenditure This Period \$ 63.69
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Whole Foods 1443 P St NW, Washington, DC 20005	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/13/2019	Amount of Each Expenditure This Period \$ 23.60
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code CVS 6 Dupont Cir NW, Washington, DC 20036	Purpose of Expenditure Supplies	Date (month, day, year) 07/14/2019	Amount of Each Expenditure This Period \$ 18.48
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Pizzeria Paradiso Dupont 2003 P St NW, Washington, DC 20036	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/14/2019	Amount of Each Expenditure This Period \$ 135.08
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 506.54

REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Committee to Hold Jack Evans Accountable

1. Full Name, Mailing Address and Zip Code Adam Eiding 2448 Massachusetts Ave NW, Washington, DC 20008	Purpose of Expenditure	Date (month, day, year) 05/20/2019	Amount of Each Expenditure This Period \$ 50.00
Contributor Type Individual			
2. Full Name, Mailing Address and Zip Code Adam Eiding 2448 Massachusetts Ave NW, Washington, DC 20008	Purpose of Expenditure	Date (month, day, year) 07/23/2019	Amount of Each Expenditure This Period \$ 60.00
Contributor Type Individual			
TOTAL This Period (Aggregate of all expenditure pages)			\$ 110.00